

16TH NOVEMBER 2017

REPORT NO. EHH1733

Hampshire County Council's Transformation Programme 2019

SUMMARY

This paper sets out the elements of the County Council's Transformation Programme 2019, which have potential future impacts on areas of service covered by the remit of the Panel.

1. Background

- 1.1 At the Community mid-cycle meeting on 24th October, the Panel were informed of the County Council's Transformation Programme, and requested more information on what this could mean for the community and our residents.

2. Hampshire County Council's Transformation Programme to 2019

- 2.1 The document at Appendix 1 highlights the areas for the Community Panel where, if the changes HCC are proposing to make come forward, there would be an effect on Rushmoor and its residents.
- 2.2 At HCC's Full Council meeting on the 2nd November, it was agreed that the proposals would move to the next stage. This will involve dialogue between HCC and affected organisations, including district councils and as options and proposals are developed, they will come forward to Members for discussion and debate.
- 2.3 In the meantime, the Panel are invited to consider the proposals in the Appendix and raise any questions or matters they would want to see taken into account. The Panel may also wish to consider whether for any of these areas, they would want to invite appropriate representation from HCC to a future meeting of the Panel.

Hampshire County Council Transformation 2019, Summary of proposals and potential impacts - Community Services Panel remit

1. Economy Transport and Environment

Our subsidies and Community Transport:

Link to 'care in the community' remit

Proposals include withdrawal of all bus subsidies and stopping the Community Transport Service, which could leave people socially isolated.

In Rushmoor, this particularly impacts on:

a) Dial a Ride

- RVS operate Rushmoor Dial-a-Ride on a contract funded by Hampshire County Council, with support from Rushmoor (grant of £34k). The two vehicles provide a 6-day week service with around 6,000 customer trips pa, for shopping, social outings, transport to health related support groups (MS, Stroke, impairments etc.), GP and other health appointments and general visits.

b) Community Transport (Minibuses for community groups)

- Quite separate from Rushmoor Dial-a-Ride, RVS operate a Community Transport Scheme using six accessible minibuses, which they own. The buses are used by RVS Members to hire for their own activities and community purposes, the scheme also covers voluntary groups in Hart District.
- RVS receive funding from HCC to operate the scheme in the form of a contract, which contributes to the salary costs of a Transport Organiser who administers the service, deals with customer bookings and manages maintenance and legal requirements. The income from HCC to part-fund the Transport Organiser is currently £16k. If this funding were removed, they would need to reduce the operation and re-design the coverage.

2. Adult Social Care and Health

The report emphasises a direction of travel on transformation of services for older people and people with physical disabilities, to enable them to remain in their own home, living as independently as possible. The general principle being; *"continued emphasis is on individuals doing more for themselves and draw from wider community support"* -

Specific areas impacted include:

a) Private Sector Housing

(1) An additional non-recurrent Improved Better Care Fund (IBCF) allocation to be received over 3 years commencing 2017/18. This is the Disabled Facilities Grant – but there is no guarantee this will be available after 2020/21.

- The expectation is for Districts to invest in transformation programmes to reduce costs over the longer term including a reduced level of hospital admissions, bed blocking and additional/innovative DFGs in order to support HCC care packages.
- **To Note:** The statutory duty to provide disabled adaptations is currently with the District Councils - although the grant funding for this now comes through the County Council via the Department for Health - previously used to be direct from DCLG.

(2) Living (more) independently - (Savings £18.3m). Transformation of services for older people and people with physical disabilities to enable them to remain in their own home, living as independently as possible. Less use of nursing and residential homes – more appropriately sized care packages.

- Impact on suitable housing provision especially in the private rented sector where landlords are less willing to allow adaptations to their properties, even with DFG assistance.
- Possible increase in demand for ground floor accommodation as applicants may be unable to manage stairs following a hospital admission and may require ground floor accommodation in order to remain living independently.
- Increase too in demand for one bedroom accommodation.
- Possible increase in homelessness- if accommodation becomes unsuitable.
- Increase in reliance for floating support services. Existing floating support provision through Home Group is not contracted to work with the over 60's – therefore leaves a gap at present. This will fall onto voluntary agencies and Local Authorities who will not be able to cater for the numbers and time pressure of intensively working with customers.

b) Housing, Health & Wellbeing

Health and Social Care Integration (required savings £18.9m)

- This links to the BCF (above) with HCC looking for saving opportunities associated with operational efficiencies. Currently waiting for more information from HCC on what this will look like.
- The HCC Public Health Team is in this Department. With 150 posts to go, this is likely to put at risk positive public health partnerships, reduce the ability to deliver and reduce services.
- HCC have pledged to engage with districts to redesign services. Here there is an assumption that districts have some capacity to pick up areas of work.
- Facilitate risk transfer of safeguarding arrangements to district council services e.g. mandatory taxi licensing safeguarding training etc.

c) Housing Options

Learning Disability and Mental Health (required saving £14.6m) – HCC are working to allow more service users to live in the community and out of long-term care settings with an aim to utilise more supported living placements. This includes working with partners to redesign Social Inclusion services for people who are homeless or threatened with homelessness.

- It appears HCC's living more independent theme continues by providing more supported living, more employment opportunities and greater level of support from within local communities. This will require substantial increase in supported living placements and the need for redesigning social inclusions service for homeless/threatened with homeless with learning disability and mental health. RBC already experience great difficulty in gaining access to supported accommodation. **HCC has advised it will be arranging to meet with Districts to look at the redesign of the learning disability mental health service.**
- Lack of supply and availability of supported housing will increase B&B placements (and resultant costs) to support this vulnerable group with often chaotic lives due to health circumstances, plus longer periods of stay in temporary accommodation, waiting for a suitable vacancy in supported housing.
- A separate piece of work is underway to engage district councils in the redesign of Social Inclusion Services for people who are homeless or at risk of homelessness.

3. Children's Services

Reduction in grant funding to voluntary agencies (Step by Step).

Youth Investment programme to cease in 2019 - reduce all youth related grant funding to £250,000

- If service is reduced or ceases then homelessness statutory duty for some will fall to the Council depending upon vulnerability. Possible consequences; this will increase use of B&B (and resultant costs) and/or increase need and use of temporary accommodation; and put vulnerable young people at risk.